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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	Pre-ejaculation Condom	•
As the below named	d inventor(s), I/we declare that:	
This declaration is di	directed to:	
	The attached application, or	:
	Application No, filed on	
İ	as amended on	
I/we believe that I/we sought;	ve am/are the original and first inventor(s) of the subject matter which is claim	
I/we have reviewed amendment specifical	and understand the contents of the above-identified application, including the cally referred to above;	claims; as amended by any
	he duty to disclose to the United States Patent and Trademark Office all inform oillty as defined in 37 CFR 1.56, including for continuation-in-part applications between the filing date of the prior application and the national or PCT intapplication.	
I to no and difficulti	e herein of my/own knowledge are true, all statements made herein on information that these statements were made with the knowledge that willfut false statement, or both, under 18 U.S.C. 1001, and may jeopardize the valid	nintananan Ab- Wisa
FULL NAME OF INV	/ENTOR(S)	
Inventor one:		
Signature:	Citizen of: U.S.A.	
Inventor two:		
	Citizen of:	
Signature:	Citizen of:	
	Citizen of:	
Additional Invent	ntors or a legal representative are being named on additional additional additional structured by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a	d form(s) attached hereto.

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DECLARATION FOR UTILITY OR

DESIGN
PATENT APPLICATION
(37 CFR 1.63)

Declaration

PTURE 001

First Named Inventor

Michael Tune

COMPLETE IF KNOWN

Application Number

Filing Date

I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Pre-ejaculation Condom the specification of which is attached hereto OR was filed on (MM/DDYYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DDYYYY) if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application inventor's or plant broader's rights certificate(s), or 365(6) of any PCT international application which designated at least one application for patent, inventor's or plant broader's rights certificate(s), or 365(6) of any PCT international application which designated at least one application for patent, inventor's or plant breeder's rights certificate(s), or 365(6) of any PCT international application which designated at least one application for patent, inventor's or plant breeder's rights certificate(s), or 365(6) of any PCT international application having a filing date Prior Foreign Application Number(s) Country Foreign Filing Date Priority Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.	Submitted OR With Initial Filing	Fillr (37	omitted after Initial og (surcharge CFR 1.16 (e)) ulred)	Art Unit Examiner Name		
Each inventor's residence, mailing address, and clitzenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Pre-ejaculation Condom the specification of which (Title of the Invention) the specification of which is attached hereto OR Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for and the national or PCT international information which became available between the filing date of the continuation-hard applications, material information which became available between the filing date of the continuation-hard application which designated at least one application of patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application which designated at least one application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date of the priority is claimed. Prior Foreign Application Country Foreign Filing Date Priority Net Claimed Priority Certified Copy Attached? Yes Not Claimed Yes Not Country Yes Not Country Priority	16					
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Number(s) Country Foreign Filing Date (MM/DD/YYYY) Not Claimed Yes No		on which priorit	y is claimed.	(s), or any PCT	international ap	plication having a filing date
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Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Direct all correspondence to:	Custome	er Number:				OR _	Corre	espondence address below
Name John P. Luther	Esq.							
Address								
Newman & N	ewman, 5	05 Fiftl	h Ave	nue (Soı	uth, Suite	610	
City				State	8			ZIP
Seattle	-			W	ashii	ngton		98104
Country		Telephor				Fax		
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NAME OF SOLE OR FIRST IN	IVENTOR:			etition	has	been filed for t	this unsk	aned inventor
Given Name						Family Name		
(first and middle [if any]) Mid	chael				_	or Sumame	Tun	ie
Inventor's								Date /
Signature		// /	1	_				Date / a / a
Park Silver	1111							12/06/03
Residence: City	State /			Cour	ntry		Citizo	enship
Colorado Springs	Colorado					•	USA	١
Mailing Address 1125 Kelly Johnson E	Blvd.							
City	State				ZIF	<u> </u>		Country
Colorado Springs	Colorado					80920		Country
NAME OF SECOND INVENTO	R:			Ti			en filéd	for this unsigned inventor
Given Name		-				Family Name		TOT THE GREEKING THE BERTH
(first and middle [if any])	•					or Sumame	:	•
Inventor's Signature							•	Date
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Additional Inventors							- 1	
Additional Inventors or a legal rep	resentative are bein	g named on t	hes	uppleme	ntel s	heet(s) PTO/SB/02	A or 02LR	attached hereto.

[Page 2 of 2]

PTO/SB/02A (05-03)

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet						
		·	-		Page	of		
Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)		Family Name or Sumame						

Inventor's Signature					Date			
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address								
City	State	e		Zip	Country			
Name of Additional Joint Inventor, if any:		☐ A pet	ition h	as been filed for this u	·	entor		
Given Name (first and middle (if any)	Given Name (first and middle (if any)		Family Name or Surname					
Inventor's Signature								
Residence: City	State	ate		Country		Citizenship		
Mailing Address								
Mailing Address								
City	State			Zip	Country			
Name of Additional Joint Inventor, if any:		☐ A peti	tion h	as been filed for this u	nsigned inv	entor		
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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Comfidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION - Supplemental Priority Data Sheet Additional foreign applications: Prior Foreign Application Number(s) Foreign Filing Date (MM/DD/YYYY) Country **Priority** Certified Copy Attached? YES NO Not Claimed

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Office of Information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 Eisenberg 001 CLAIMS AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE RATE FEE RATE (37 CFR 1.16(a)) FEE TOTAL CLAIMS OR (37 CFR 1.16(c)) minus 20 = INDEPENDENT CLAIMS OR (37 CFR 1.15(b)) minus 20 = X \$ OR MULTIPLE DEPENDENT CLASM PRESENT (37 CFR 1.18(d)) OR " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL **OR** TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS HIGHEST SMALL ENTITY REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PRESENT RATE ADDI-RATE ADDI-TIONAL EXTRA TIONAL PAID FOR FEE Minus AMENDIA (37 CFR 1.10(c)) FEE independent (37 CFR 1.16(b)) OR Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d)) OR OR TOTAL TOTAL ADD'L FEE ÓR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST $\mathbf{\omega}$ REMAINING PRESENT ENT ADDI-TIONAL AFTER RATE PREVIOUSLY EXTRA RATE ADDI-AMENDMENT PAID FOR TIONAL. ENDME Total (37 CFR 1.18(c)) FEE = FEE Independent (37 CFR 1.18(b)) Minus OR OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT ENDMENT RATE ADDI-TIONAL AFTER. PREVIOUSLY EXTRA RATE ADDI-AMENDMENT PAID FOR TIONAL Total FIT CFR 1.16(d) FEE Minus FEE Independent (37 CFR 1.15(b)) Minus OR

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* if the entry in column 1 is less than the entry in column 2, write "o" in column 3.

** if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

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Application Number

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INDICATION FORM

Examiner Name Attorney Docket Number **Tune 001** I hereby appoint Practitioners at Customer Number: 0R Practitioner(s) named below: Name Registration Number John P. Luther, Esq. 32,261 Newman & Newman, LLP 505 Fifth Avenue South, Suite 610 Seattle, WA 98104 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR The address associated with Customer Number: Firm or Individual Name Address Address City State Country Zip Telephone Fax am the: Applicant/inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Signature Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. *Total of forms are submitted.

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